

and constitutional use. The method is fully described, and an illustration is given of an ingenious automatic syringe by means of which the amount of solution injected can be limited to one drop when necessary.

FOREIGN BODIES IN THE MAXILLARY SINUS.

I. In an article upon this subject (*Archives Internat. de Laryngol. de Rhinol. et d'Otol.*, 1895, No. 1) DR. M. GOULY reports a case in which, while washing out the sinus after an operation, the patient made an abrupt movement by which the end of the canula broke off and remained in the sinus. Eight days afterward the foreign body was expelled from the nasal fossa while the canal was being washed out. Rhinoscopic examination showed considerable hypertrophy of the mucous membrane of the middle meatus. The end of the canula, which was conical in form, measured fifteen millimetres in length and six millimetres in breadth at its base, almost the extreme limits of the size of the largest semilunar hiatus.

Dr. Gouly refers to a case of Eulenstein's, in which the point of a trocar had remained several months in the sinus, and was evacuated by the nasal fossa during a washing; a case of Koenig's, in which a knife-blade four centimetres in length escaped subsequently from the nose, after having sojourned forty-eight years (?) in the sinus; a case of A. Combe's, in which a drainage-tube was eliminated spontaneously from the nasal fossa after a sojourn of four years and one month; and a case of Moure's, in which twelve fragments of cotton had been pushed into the sinus by a dentist after the extraction of the first molar. Three of these fragments were extracted subsequently by forceps, and the last one was expelled from the nose during the use of the handkerchief.

As a result of these and other cases reported, the writer recommends abstinence from all active intervention other than repeated ablutions of the sinus, unless some deleterious consequences point to more energetic treatment.

II. In an article on the same subject (*Revue de Laryngol. d'Otol. et de Rhinol.*, 1895, No. 5) DR. J. BARATOUX, of Paris, presents a summary of the literature on this theme, and follows with a record of two interesting cases of his own, both the result of bad dentistry. The first one was the wife of the dentist himself, who, during a period of eighteen months or more, had inserted pledgets of cotton in a fistulous tract at the level of the second molar in order to treat, as he supposed, the shell of tooth remaining in the alveolus. Dr. Baratoux had the alveolus opened, when a mass of cotton the volume of a small orange was removed from the sinus.

It appears that the dentist had taken it for granted that his wife had either swallowed the tampons or lost them, and was ignorant of the fact that the fistula communicated with the maxillary sinus.

The second case was a still more unfortunate one. A lady's antrum had been opened by the sacrifice of a healthy first molar, although the second molar was gone, and a laminaria-tent had been inserted into the orifice to keep it open. The next day a silver tube was introduced into this opening, but no trace could be found of the laminaria-tent, which the patient was accused of having lost, although she denied it positively.

During a period of six years this poor woman was subjected to various

operations through the cheek for the relief of a suppuration of the sinus which was not supposed to be due to the presence of a foreign body. She finally was transferred to the care of Dr. Baratoux, who extracted, through the fistula of the cheek, half of the laminaria-tent, three and one-half centimetres in length and four millimetres in diameter; and three weeks later he extracted the other half, after which the patient got well.

HEMORRHAGIC PHARYNGITIS.

Under this head DR. NATIER narrates (*Rev. Internat. de Rhinologie*, etc., 1894, No. 15) a case of effusions of blood from the pharynx of a shopman, twenty-nine years of age, one or twice to the amount of a tumblerful—once, indeed, under the eye of the narrator, to the amount of a liqueurglassful. No lesion existed, the hemorrhage being purely diapedic. It was finally controlled by an application of silver nitrate solution, 1:8, followed by applications of citron-juice made by the patient on occasion of recurrence for a few days.

TROPHIC ULCERATIONS OF NOSE AND EARS IN A CASE OF BULBAR TABES.

DR. C. GIRANDEAU publishes (*La Presse Médicale*, October 27, 1894) this interesting and unique case: A postman, thirty-eight years of age, had been for six years a subject of tabes, which had begun with strabismus and other ocular disorders, followed two years later by vertigo, genito-urinary disorders, and intense gastric crises often excitable by odors, such as tobacco-smoke. During the last eight months indolent ulcerations and erosions had occurred about the orifices of the nose and ears and upon the surfaces of frontal cicatrices of apparently syphilitic origin. Under the internal use of silver nitrate and topical applications of boric acid much amelioration had been produced, and had become much more pronounced under subcutaneous injections of testicular liquid on the method of Brown-Séquard, the ulceration having become completely controlled in some places, while it remained stationary in others.

PHARYNGEAL SPASM IN TABES.

MR. COURMONT has observed (*Revue de Méd.*, September, 1894, *idem.*) a case of veritable tonic spasm of the pharynx absolutely analogous to laryngeal crises. The symptoms were so intense that alimentation became impossible and death appeared imminent. There was no laryngeal, œsophageal, or gastric phenomena. The manifestations ceased abruptly under the influence of suspension. Hence it was inferred that the spasms must have been due to peripheral lesion.

CYST OF THE LARYNX CURED BY INJECTIONS OF CARBOLIC ACID.

In the *New York Medical Journal*, 1894, No. 882, PROF. INGALS, of Chicago, reports a large cyst of the ventricular band, and probably of some two years' duration, in a man forty-three years of age. Injections of lactic acid failing to reduce the growth permanently, solutions of carbolic acid, 8 to 10 per cent., in glycerin and water, were injected once a week or so for five or